

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 18  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">09</span> / <span style="border: 1px solid black; padding: 2px;">27</span> / <span style="border: 1px solid black; padding: 2px;">2012</span>					
Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)			Date <span style="border: 1px solid black; padding: 2px;">09</span> / <span style="border: 1px solid black; padding: 2px;">25</span> / <span style="border: 1px solid black; padding: 2px;">2012</span>		
Mailing Address 1325 Massachusetts Ave. NW			Amount <span style="border: 1px solid black; padding: 2px;">437.50</span>		
City Washington State DC Zip Code 20005		Transaction ID : D447621			
Purpose of Expenditure In Kind Staff		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>		Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: DEAN HELLER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">34702.05</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶			
Full Name (Last, First, Middle Initial) of Payee <b>Extras, Inc.</b>			Date <span style="border: 1px solid black; padding: 2px;">09</span> / <span style="border: 1px solid black; padding: 2px;">25</span> / <span style="border: 1px solid black; padding: 2px;">2012</span>		
Mailing Address 151 East Lost Toritos			Amount <span style="border: 1px solid black; padding: 2px;">1738.23</span>		
City Weslaco State TX Zip Code 78596		Transaction ID : D453115			
Purpose of Expenditure Canvassers		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>		Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: DEAN HELLER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">34702.05</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			<span style="border: 1px solid black; padding: 2px;">2175.73</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures.....▶			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Ms. Elizabeth H Shuler</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">10</span> / <span style="border: 1px solid black; padding: 2px;">16</span> / <span style="border: 1px solid black; padding: 2px;">2012</span>	

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Workers' Voice

FEC IDENTIFICATION NUMBER ▼

C

C00484287

Check If ☐ 24-hour report ☒ 48-hour report☐ New report ☒ Amends report filed onM M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

Full Name (Last, First, Middle Initial) of Payee

Extras, Inc.

Date

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

Mailing Address 151 East Lost Toritos

Amount

1738.23

City

Weslaco

State

TX

Zip Code

78596

Transaction ID : D453405

Purpose of Expenditure  
CanvassersCategory/  
Type

001

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

00

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Willard Mitt Romney

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶Calendar Year-To-Date Per Election  
for Office Sought

430667.31

Full Name (Last, First, Middle Initial) of Payee

COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION

Date

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

Mailing Address 100 Indiana Avenue, N.W.

Amount

815.70

City

Washington

State

DC

Zip Code

20001

Transaction ID : D453610

Purpose of Expenditure  
In Kind StaffCategory/  
Type

001

Office Sought:

☐ House

State:

☒ Senate

District:

☐ President

WI

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

TAMMY BALDWIN

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶Calendar Year-To-Date Per Election  
for Office Sought

65825.33

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

2553.93

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

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Ms. Elizabeth H Shuler

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 3 OF 18  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY	MM / DD / YYYY
		09 / 27 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>Plasterers' Cement Masons' &amp; Shop Hands Political Action Committee</b>		Date MM / DD / YYYY 09 / 25 / 2012	
Mailing Address 11720 Beltsville Drive #700		Amount 321.82	
City Beltsville	State MD	Zip Code 20705	Transaction ID : D453611
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: TAMMY BALDWIN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 65825.33		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>AFT Solidarity 527</b>		Date MM / DD / YYYY 09 / 25 / 2012	
Mailing Address 555 New Jersey Ave. N.W.		Amount 102.30	
City Washington	State DC	Zip Code 20001	Transaction ID : D453612
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: TAMMY BALDWIN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 65825.33		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	424.12
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 16 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 4 OF 18  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Workers' Voice

FEC IDENTIFICATION NUMBER ▼

C C00484287

Check If ☐ 24-hour report ☒ 48-hour report☐ New report ☒ Amends report filed onM M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

Full Name (Last, First, Middle Initial) of Payee

Mosaic

Date

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

Mailing Address 4801 Viewpoint Place

Amount

450.00

City

Cheverly

State

MD

Zip Code

20781

Transaction ID : D453614

Purpose of Expenditure  
FliersCategory/  
Type 004

Office Sought:

☐ House

State: OH

☒ Senate

District: 00

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Sherrod Brown

Calendar Year-To-Date Per Election  
for Office Sought

181828.58

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Mosaic

Date

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

Mailing Address 4801 Viewpoint Place

Amount

750.00

City

Cheverly

State

MD

Zip Code

20781

Transaction ID : D453615

Purpose of Expenditure  
FliersCategory/  
Type 004

Office Sought:

☐ House

State: PA

☒ Senate

District: 00

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bob Casey

Calendar Year-To-Date Per Election  
for Office Sought

25923.53

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

1200.00

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

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Ms. Elizabeth H Shuler

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 5 OF 18  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Workers' Voice

FEC IDENTIFICATION NUMBER ▼

C

C00484287

Check If ☐ 24-hour report ☒ 48-hour report☐ New report ☒ Amends report filed onM M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

Full Name (Last, First, Middle Initial) of Payee

AFL-CIO

Date

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

Mailing Address 815 - 16th Street, NW

Amount

4.54

City

Washington

State

DC

Zip Code

20006

Transaction ID : D453616

Purpose of Expenditure

Walk Packets

Category/  
Type

004

Office Sought:

☐ House

State: PA

☒ Senate

District: 00

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bob Casey

Disbursement For: ☐ Primary ☒ General

2012

☐ Other (specify) ▶Calendar Year-To-Date Per Election  
for Office Sought

25923.53

Full Name (Last, First, Middle Initial) of Payee

AFL-CIO

Date

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

Mailing Address 815 - 16th Street, NW

Amount

1.55

City

Washington

State

DC

Zip Code

20006

Transaction ID : D453617

Purpose of Expenditure

Walk Packets

Category/  
Type

004

Office Sought:

☒ House

State: PA

☐ Senate

District: 12

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

MARK CRITZ

Disbursement For: ☐ Primary ☒ General

2012

☐ Other (specify) ▶Calendar Year-To-Date Per Election  
for Office Sought

42198.58

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

6.09

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

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Ms. Elizabeth H Shuler

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 6 OF 18  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on	
		MM / DD / YYYY 09 / 27 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>AFL-CIO</b>		Date MM / DD / YYYY 09 / 25 / 2012	
Mailing Address 815 - 16th Street, NW		Amount 32.82	
City Washington	State DC	Zip Code 20006	Transaction ID : D453620
Purpose of Expenditure Walk Packets	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 85189.53		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>AFL-CIO</b>		Date MM / DD / YYYY 09 / 25 / 2012	
Mailing Address 815 - 16th Street, NW		Amount 32.82	
City Washington	State DC	Zip Code 20006	Transaction ID : D453622
Purpose of Expenditure Walk Packets	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 85189.53		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	65.64
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 16 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 7 OF 18  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY	MM / DD / YYYY
		09 / 27 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION</b>		Date MM / DD / YYYY 09 / 25 / 2012	
Mailing Address 100 Indiana Avenue, N.W.		Amount 1075.25	
City Washington	State DC	Zip Code 20001	Transaction ID : D453623
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 430667.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Plasterers' Cement Masons' &amp; Shop Hands Political Action Committee</b>		Date MM / DD / YYYY 09 / 25 / 2012	
Mailing Address 11720 Beltsville Drive #700		Amount 880.53	
City Beltsville	State MD	Zip Code 20705	Transaction ID : D453624
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 430667.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1955.78
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 16 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 8 OF 18  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY	MM / DD / YYYY
		09 / 27 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>AFT Solidarity 527</b>		Date MM / DD / YYYY 09 / 25 / 2012	
Mailing Address 555 New Jersey Ave. N.W.		Amount 102.30	
City Washington	State DC	Zip Code 20001	Transaction ID : D453625
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 430667.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Mosaic</b>		Date MM / DD / YYYY 09 / 25 / 2012	
Mailing Address 4801 Viewpoint Place		Amount 2790.00	
City Cheverly	State MD	Zip Code 20781	Transaction ID : D453626
Purpose of Expenditure Fliers	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 430667.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2892.30
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Ms. Elizabeth H Shuler

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Date

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10 / 16 / 2012

Signature



# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 9 OF 18  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Workers' Voice

FEC IDENTIFICATION NUMBER ▼

C C00484287

Check If ☐ 24-hour report ☒ 48-hour report☐ New report ☒ Amends report filed onM M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

Full Name (Last, First, Middle Initial) of Payee

AFL-CIO

Date

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

Mailing Address 815 - 16th Street, NW

Amount

40.66

Transaction ID : D453627

Purpose of Expenditure  
Walk PacketsCategory/  
Type 004

Office Sought:

☐ House

State:

☐ Senate

District: 00

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Barack Obama

Disbursement For:

☐ Primary☒ General

2012

☐ Other (specify) ▶Calendar Year-To-Date Per Election  
for Office Sought

430667.31

Full Name (Last, First, Middle Initial) of Payee

COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION

Date

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

Mailing Address 100 Indiana Avenue, N.W.

Amount

1075.25

Transaction ID : D453628

Purpose of Expenditure  
In Kind StaffCategory/  
Type 001

Office Sought:

☐ House

State:

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Willard Mitt Romney

Disbursement For:

☐ Primary☒ General

2012

☐ Other (specify) ▶Calendar Year-To-Date Per Election  
for Office Sought

430667.31

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

1115.91

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012

Signature

**24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES**  
(SCHEDULE E)PAGE 10 OF 18  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Workers' Voice

FEC IDENTIFICATION NUMBER ▼

C C00484287

Check If ☐ 24-hour report ☒ 48-hour report☐ New report ☒ Amends report filed onM M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

Full Name (Last, First, Middle Initial) of Payee

Plasterers' Cement Masons' &amp; Shop Hands Political Action Committee

Date

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

Mailing Address 11720 Beltsville Drive #700

Amount

880.53

Transaction ID : D453629

Purpose of Expenditure  
In Kind StaffCategory/  
Type 001

Office Sought:

☐ House

State:

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Willard Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

430667.31

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

AFT Solidarity 527

Date

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

Mailing Address 555 New Jersey Ave. N.W.

Amount

102.30

Transaction ID : D453630

Purpose of Expenditure  
In Kind StaffCategory/  
Type 001

Office Sought:

☐ House

State:

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Willard Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

430667.31

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

982.83

(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 11 OF 18  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Workers' Voice

FEC IDENTIFICATION NUMBER ▼

C C00484287

Check If ☐ 24-hour report ☒ 48-hour report☐ New report ☒ Amends report filed onM M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

Full Name (Last, First, Middle Initial) of Payee

Mosaic

Date

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

Mailing Address 4801 Viewpoint Place

Amount

2790.00

City

Cheverly

State

MD

Zip Code

20781

Transaction ID : D453631

Purpose of Expenditure  
FliersCategory/  
Type 004

Office Sought:

☐ House

State:

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Willard Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

430667.31

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

AFL-CIO

Date

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

Mailing Address 815 - 16th Street, NW

Amount

40.66

City

Washington

State

DC

Zip Code

20006

Transaction ID : D453632

Purpose of Expenditure  
Walk PacketsCategory/  
Type 004

Office Sought:

☐ House

State:

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Willard Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

430667.31

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

2830.66

(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 12 OF 18  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on	
		MM / DD / YYYY 09 / 27 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>AFL-CIO</b>		Date MM / DD / YYYY 09 / 25 / 2012	
Mailing Address 815 - 16th Street, NW		Amount 1.55	
City Washington	State DC	Zip Code 20006	Transaction ID : D453633
Purpose of Expenditure Walk Packets	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 12
Name of Federal Candidate Supported or Opposed by Expenditure: KEITH ROTHFUS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 42198.58		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Mosaic</b>		Date MM / DD / YYYY 09 / 25 / 2012	
Mailing Address 4801 Viewpoint Place		Amount 900.00	
City Cheverly	State MD	Zip Code 20781	Transaction ID : D453634
Purpose of Expenditure Fliers	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 25923.53		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	901.55
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 16 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 13 OF 18  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Workers' Voice

FEC IDENTIFICATION NUMBER ▼

C C00484287

Check If ☐ 24-hour report ☒ 48-hour report☐ New report ☒ Amends report filed onM M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

Full Name (Last, First, Middle Initial) of Payee

AFL-CIO

Date

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

Mailing Address 815 - 16th Street, NW

Amount

4.54

Transaction ID : D453635

Purpose of Expenditure  
Walk PacketsCategory/  
Type 004

Office Sought:

☐ House

State: PA

☒ Senate

District: 00

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

TOM SMITH

Calendar Year-To-Date Per Election  
for Office Sought

25923.53

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

APWU Separate Segregated Super PAC Account

Date

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

Mailing Address 1300 L Street, NW

Amount

170.00

Transaction ID : D462929

Purpose of Expenditure  
In Kind StaffCategory/  
Type 001

Office Sought:

☐ House

State:

☐ Senate

District: 00

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Barack Obama

Calendar Year-To-Date Per Election  
for Office Sought

430667.31

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

174.54

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 14 OF 18  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on			MM / DD / YYYY 09 / 27 / 2012		
Full Name (Last, First, Middle Initial) of Payee <b>APWU Separate Segregated Super PAC Account</b>			Date MM / DD / YYYY 09 / 25 / 2012		
Mailing Address 1300 L Street, NW			Amount 170.00		
City Washington State DC Zip Code 20005		Transaction ID : D462930			
Purpose of Expenditure In Kind Staff		Category/ Type 001		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 430667.31			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
Full Name (Last, First, Middle Initial) of Payee <b>COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION</b>			Date MM / DD / YYYY 09 / 25 / 2012		
Mailing Address 100 Indiana Avenue, N.W.			Amount 815.70		
City Washington State DC Zip Code 20001		Transaction ID : D453636			
Purpose of Expenditure In Kind Staff		Category/ Type 001		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: TOMMY G THOMPSON				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 65825.33			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....			985.70		
(b) SUBTOTAL of Unitemized Independent Expenditures .....					
(c) TOTAL Independent Expenditures.....					
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Ms. Elizabeth H Shuler</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date MM / DD / YYYY 10 / 16 / 2012</p>					

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 15 OF 18  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on	
		MM / DD / YYYY 09 / 27 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>Plasterers' Cement Masons' &amp; Shop Hands Political Action Committee</b>			Date MM / DD / YYYY 09 / 25 / 2012	
Mailing Address 11720 Beltsville Drive #700			Amount 321.82	
City Beltsville	State MD	Zip Code 20705	Transaction ID : D453637	
Purpose of Expenditure In Kind Staff		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: TOMMY G THOMPSON			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 65825.33			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>AFT Solidarity 527</b>			Date MM / DD / YYYY 09 / 25 / 2012	
Mailing Address 555 New Jersey Ave. N.W.			Amount 102.30	
City Washington	State DC	Zip Code 20001	Transaction ID : D453638	
Purpose of Expenditure In Kind Staff		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: TOMMY G THOMPSON			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 65825.33			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	424.12
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

Signature

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 16 / 2012

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 16 OF 18  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY	MM / DD / YYYY
		09 / 27 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION</b>		Date MM / DD / YYYY 09 / 25 / 2012	
Mailing Address 100 Indiana Avenue, N.W.		Amount 1075.25	
City Washington	State DC	Zip Code 20001	Transaction ID : D453642
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 430667.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Plasterers' Cement Masons' &amp; Shop Hands Political Action Committee</b>		Date MM / DD / YYYY 09 / 25 / 2012	
Mailing Address 11720 Beltsville Drive #700		Amount 880.53	
City Beltsville	State MD	Zip Code 20705	Transaction ID : D453643
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 430667.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1955.78
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Ms. Elizabeth H Shuler

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 16 / 2012

Signature



# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 17 OF 18  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY	MM / DD / YYYY
		09 / 27 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>AFT Solidarity 527</b>		Date MM / DD / YYYY 09 / 25 / 2012	
Mailing Address 555 New Jersey Ave. N.W.		Amount 102.30	
City Washington	State DC	Zip Code 20001	Transaction ID : D453644
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 430667.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Mosaic</b>		Date MM / DD / YYYY 09 / 25 / 2012	
Mailing Address 4801 Viewpoint Place		Amount 2790.00	
City Cheverly	State MD	Zip Code 20781	Transaction ID : D453645
Purpose of Expenditure Fliers	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 430667.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2892.30
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 16 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 18 OF 18  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on			<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY 09 / 27 / 2012</div> </div>		
Full Name (Last, First, Middle Initial) of Payee <b>AFL-CIO</b>			Date <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY 09 / 25 / 2012</div>		
Mailing Address 815 - 16th Street, NW			Amount <div style="border: 1px solid black; padding: 2px;">40.66</div>		
City Washington State DC Zip Code 20006		Transaction ID : D453646			
Purpose of Expenditure Walk Packets		Category/Type 004		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">430667.31</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee			Date <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div>		
Mailing Address			Amount <div style="border: 1px solid black; padding: 2px;"></div>		
City State Zip Code		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Purpose of Expenditure		Category/Type		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure:				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"></div>					
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			<div style="border: 1px solid black; padding: 2px;">40.66</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶			<div style="border: 1px solid black; padding: 2px;"></div>		
(c) TOTAL Independent Expenditures.....▶			<div style="border: 1px solid black; padding: 2px;">23577.64</div>		
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"> <div style="text-align: center;"> <p><i>Ms. Elizabeth H Shuler</i></p> <p>Signature</p> </div> <div style="text-align: center;"> <p>[Electronically Filed]</p> </div> <div style="text-align: center;"> <p>Date</p> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY 10 / 16 / 2012</div> </div> </div>					